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PATENT APPLICATION FEE DETERMINATION RECORD
 Substitute for Form PTO-875

Application or Dock Number: **10/811817**

CLAIMS AS FILED - PART I

(Column 1)	(Column 2)	(Column 3)
FOR	NUMBER FILED	NUMBER EXTRA
BASIC FEE (37 CFR 1.10(a))		
TOTAL CLAIMS (37 CFR 1.10(c))	3	0
INDEPENDENT CLAIMS (37 CFR 1.10(d))	1	0
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.10(d))		

* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY	OR	OTHER THAN SMALL ENTITY	
RATE	FEE	RATE	FEE
	\$ 70		
TOTAL		TOTAL	70

CLAIMS AS AMENDED - PART II

(Column 1)	(Column 2)	(Column 3)	(Column 4)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.10(c))	3	20	1
Independent (37 CFR 1.10(d))	1	3	1
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.10(d))			

SMALL ENTITY	OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
TOTAL ADDL FEE		TOTAL ADDL FEE	

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(Column 1)	(Column 2)	(Column 3)	(Column 4)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.10(c))	11	20	0
Independent (37 CFR 1.10(d))	2	3	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.10(d))			

SMALL ENTITY	OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
TOTAL ADDL FEE		TOTAL ADDL FEE	

(Column 1)	(Column 2)	(Column 3)	(Column 4)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total (37 CFR 1.10(c))			
Independent (37 CFR 1.10(d))			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.10(d))			

SMALL ENTITY	OR	OTHER THAN SMALL ENTITY	
RATE	ADDITIONAL FEE	RATE	ADDITIONAL FEE
TOTAL ADDL FEE		TOTAL ADDL FEE	

* If a entry in column 1 is less than the entry in column 2, enter "0" in column 3.
 ** If the highest number previously paid for in THIS SPACE is less than 20, enter "20".
 *** If the highest number previously paid for in THIS SPACE is less than 3, enter "3".
 The highest figure in Presently Paid For (Total or Independent) is the highest number found in the appropriate box in column 1.

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